

CLAIMS ONLY							Application Number 10/786,997	Filing Date
							Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51	
2							52	
3							53	
4							54	
5	1						55	
6	X						56	
7							57	
8	X						58	
9							59	
10	X						60	
11							61	
12							62	
13							63	
14	X						64	
15	X						65	
16							66	
17							67	
18							68	
19							69	
20							70	
21							71	
22							72	
23							73	
24							74	
25	X						75	
26	X						76	
27							77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	2						Total Indep	
Total Depend	b3						Total Depend	
Total Claims	b5						Total Claims	